

A.P. No. 1022-09-001-013  
Escrow No. 125-2562947-CY/lf

*WHEN RECORDED RETURN TO:*

Kathleen A. McKee  
3615 Sandstone Dr  
Wellington, NV 89444

## NOTICE OF COMPLETION

### NOTICE IS HEREBY GIVEN THAT:

1. The undersigned as OWNER of the interest or estate stated below in the property hereinafter described.
2. The **FULL NAME** of the undersigned is **Kathleen A. McKee**.
3. The **FULL ADDRESS** of the undersigned is **3615 Sandstone Drive, Wellington, NV 89444**.
4. The **NATURE OF THE INTEREST** or **ESTATE** of the undersigned is: Fee.
5. The **FULL NAMES** and **FULL ADDRESSES** of **ALL PERSONS**, if any, **WHO HOLD SUCH INTEREST** or **ESTATE** with the undersigned as **JOINT TENANTS** or as **TENANTS IN COMMON** are: **N/A**.
6. The full names and full addresses of the predecessors in interest of the undersigned of the property was transferred subsequent to the commencement of the work of improvement herein referred to: **N/A**.
7. A work of improvement on the property hereinafter described was **COMPLETED** 9-16-2020.
8. The work of improvement completed is described as follows: **Single Family Residence**.
9. The **NAME OF THE ORIGINAL CONTRACTOR**, if any, for such work of improvement is **Craftsman Homes, LLC**.
10. The street address of said property is **3615 Sandstone Drive, Wellington, NV 89444**.
11. The property on which said work of improvement was completed is in the City of **Wellington**, County of **Douglas**, State of **Nevada**, and is described as follows:

**LOT 113, AS SHOWN ON THE MAP OF TOPAZ RANCH ESTATES UNIT NO. 3 ,  
ACCORDING TO THE MAP THEREOF, FILED IN THE OFFICE OF THE COUNTY  
RECORDER OF DOUGLAS COUNTY, STATE OF NEVADA, ON MARCH 31, 1969, IN BOOK  
1 OF MAPS, PAGE 221, AS DOCUMENT NO. 44091.**

Verification for NON INDIVIDUAL or INDIVIDUAL Owner

I, the undersigned, declare under penalty of perjury under the laws of the State of Nevada that I am the owner/agent of the aforesaid interest or estate in the property described in the above notice; that I have read said notice, that I know and understand the contents thereof, and the facts stated therein are true and correct.

A.P.N.: **1022-09-001-013**

Notice of Completion - continued

File No.: **125-2562947 (CY)**

Kathleen A. McKee  
Kathleen A. McKee

STATE OF **NEVADA** )  
  : **ss.**  
COUNTY OF Carson )  
  City

This instrument was acknowledged before me on 04/21/2020 by  
**Kathleen A. McKee.**

Karen Lockard  
Notary Public

(My commission expires: 10/03/2022)

